Name of Employee

1.

## REVIEW/APPROVAL FORM FOR WIDELY ATTENDED GATHERINGS (WAG)

1 7	
Signature of Employee	
Telephone Number	
Organizational Element	(for blanket determination)
Name of Supervisor	
Conference or event (WAG)	
Date of Request	Date of WAG
Location of WAG	Time of WAG
attendance is appropriate under the exception to the for Employees of the Executive Branch (5 CFR Par	

? If yes, attendance on the day(s) of the employee's actual presentation is a customary and necessary part of his performance of the assignment and does not involve a gift to the individual or the FDA. No further action is necessary.

No

Is the employee assigned on official duty to participate as a speaker, panel member or otherwise

to present information on behalf of FDA at a conference or similar engagement?

Yes

? If No, or the invitation includes attendance for days when the employee will not be making a presentation, proceed to Question 2.

2.	Has someone other than the sponsor of the event designated the employee to be invited and someone other than the sponsor bear the cost of the employee's attendance?		
	? If the answer to either is No, proceed to Question 3.		
	? If the answer to both is Yes, the invitation may not be accepted under the widely attended gathering exception UNLESS more than 100 persons are expected to attend the event and the gift of free attendance has a market value of \$285 or less.		
	? If the market value of the gift of free attendance is \$285 or less AND more than 100 persons are expected to attend proceed to Question 3.		
	? If the answer to <u>either</u> question is <b>no</b> this gift may not be accepted under this gift exception rule.		
3.	Was the offer of free attendance solicited?		
	? If Yes, the invitation may not be accepted.		
	? If No, proceed to Question 4.		
4.	Is the event "widely attended" within the meaning of 5 CFR 2635.204(g)(2)? Currently, there is no precise test for determining whether an event is "widely attended" but several factors may be relevant to this determination in a given case:		
	a. Is the event open to members from throughout a given industry?		
	Yes No		
	? If Yes, please provide a brief description including the different interests and points of view they may represent.		
	b. Will individuals in attendance represent a range of persons interested in a		
	given matter?		

Yes No

	c. Is the event expected to be attended by a large number of people?
	Yes No
	? If Yes, please provide the approximate number of expected attendees.
What i	s the purpose of the event and where will it be held?
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Is atter	ndance at this event in the interest of the agency because it will further agency prog
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	ndance at this event in the interest of the agency because it will further agency progions?  Yes  No  ? If Yes, explain how the event relates to the employee's duties and how attend

7.	A WAG exception involves a git subject to a leave system must b		er than the FDA. Therefore, any individual nave an excused absence.
	? Will the event be after	er duty hours, e.g. even	ning, weekend?
		Yes	No
	? If during duty hours with the Delegation of A		on excused absence in accordance Guide 1431.4(d) <sup>1</sup> .
		Yes	No
8.	Does the invitation include attended	lance by the employe	e's spouse or other guest? <sup>2</sup>
		Yes	No
	? If Yes, will other atte other guests.	ndees at the event ger	nerally be accompanied by their spouse or
		Yes	No
		with the value of the e	or is paying, the value of the guest's free employee's free attendance in applying the
9.	What is the monetary value of the (conference fee, ticket price, etc.)	•	ce and how was this cost determined
	lrea		1.1 4 5 '

<sup>&</sup>lt;sup>1</sup>If the immediate supervisor recommends approval, and the Agency Designee approves attendance, the employee's attendance during duty hours may be on excused absence without charge to the employee's leave account.

<sup>&</sup>lt;sup>2</sup>Under the provisions of 5 CFR 2635.204(g)(6) when others in attendance will generally be accompanied by spouses or other guests, the Agency Designee may authorize an employee to accept a sponsor's invitation to an accompanying spouse or other guest to participate in all or a portion of the event.

other si	If the value of the WAG is \$285 or if it is valued at more than \$114 and the employee accepts uch gifts from the same source in excess of \$114 each if the aggregate value reaches \$285 or the employee must report this on the financial disclosure form in the appropriate section on gifts. Does the person/organization who extended the invitation have interests that may be substantially affected by the performance or nonperformance of the attendee's official duties? (if the invitation is from an organization/association, do the majority of its members have such interests?)
	Yes No
	<ul> <li>? If the response to Question 10 is No, please forward this checklist to HFA-320 for action. If the response to Question 10 is Yes, authorization to attend may be granted only if the Agency Designee issues a written finding that the FDA's interest in the employee's participation outweighs concern that acceptance of the gift may or may appear to improperly influence the employee in the performance of his official duties.</li> <li>? If the response to Question 10 is Yes, please provide the following information to assist the Agency Designee in reaching a decision:</li> <li>Describe the purpose and the importance of the event to FDA:</li> </ul>
	Provide information on the nature and sensitivity of any pending matter(s) affecting the interests of the sponsor of the event:
	Describe the significance, if any, of the employee's role in the matter described above:
	Provide information on the identity of other expected participants at the event:

ervisor Review:		
Name:	Date: Date: Recommend Disapproval:	
Comments:	Recommend Disapproval.	
Signature_	Date	
cs and Integrity Branch:		
Name:	Date:Recommend Disapproval:	
Recommend Approval :	Recommend Disapproval:	
		Comments

Signature	Date
Division of M	one gement Dregneric Deviews
Division of wi	anagement Programs Review:
Name:	
Recomme	end Approval:Recommend Disapproval:
	Comments:
a.	
Signature_	Date
Agency Des	ignee Action:
	oval may be a blanket determination to cover any or all categories of invitees for whom er to Question 10 would be No.
	determination may be issued to cover two or more employees whose duties similarly
	interests of the sponsor or its members for those employees for whom the answer to 10 would be Yes.
This form constitu	ites my written determination that:
A	ttendance at this is event is approved.
A	ttendance at this event is not approved.
T	he sponsor's offer to the employee's spouse/guest is authorized.

Mary L. Babcock	Date	
Director, Office of Human Resources and		
Management Services		

Additional Information Attached